EXPRESS	MAIL	LABEL	NO.	EU869913786	US
----------------	------	-------	-----	-------------	----

PTO/SB/05 (11-00) Approved for use through 10/31/2002. OMB 0851-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control nut

UTILITY PATENT APPLICATION **TRANSMITTAL**

Pluase type a plus sign (+) inside this box —

Attorr	ney Docket No.	2125	
First I	nventor	Suzanne	D. Lady
Title	Glide Mount	Support	Base Apparatus

(Only for new nonprovis	sional applications under	37 CFR 1.53(b))	Expres	ss Mail Label No	o. EU86991378	5 US		
	CATION ELEMENTS		AD	DRESS TO:	Assistant Commission Box Patent Application	sioner for Patents		
See MPEP chapter 600 cc	onceming utility patent an	pplication contents.			Washington, DC 2	20231		
(Submit an original or	Form (e.g., PTO/SB/17) d u duplicate for fee processing)		7.	CD-ROM or C	D-R in duplicate, lar			
2. XX Applicant claims See 37 CFR 1.2	s small entity status.		8. Ni	icleotide and/or Am	gram (Appendix) nino Acid Sequence	Submission 500		
Specification	. ITotal Pages	21	(ii	applicable, all nece	essary)	ώ <u>ν</u>		
(preterred arrangem	tile of the invention	·	a.		eadable Form (CRF)	100		
- Cross Refere	nce to Related Application	ns	b.	Specification Sequ		, = 2		
- Reference to	egarding Fed sponsored sequence listing, a table				OM or CD-R (2 copi	es); or . $\sqrt{2}$		
or a compute	r program listing append of the Invention	ix		paper		: N		
- Brief Summai	v of the Invention		<u> </u>		verifying identity of a			
- Brief Descript - Detailed Descript	ion of the Drawings (if file	9 a)			NG APPLICATI			
- Claim(s)			9. [Assignment P	apers (cover sheet (
- Abstract of th	e Disclosure		10.	37 CFR 3.73((when there is	s an assignee)	Power of Attorney		
4. XX Drawing(s) (35	U.S.C. 113) [Total Sh	eels 6	11. [lation Document (if			
5. Oath or Declaration	[Total Pa	ges 2	12.	y Information D		Copies of IDS Citations		
a. Newly exe	cuted (original or copy)		13. [Preliminary A				
	a prior application (37 Cl ation/divisional with Box		14.	14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized)				
i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s)				15. Certified Copy of Priority Document(s) (if foreign priority is claimed)				
named in	the prior application, see 37	CFR	16.	Request and	Certification under 3	5 U.S.C. 122		
) and 1.33(b).		10.	— (b)(2)(B)(i). A _f	oplicant must attach	form PTO/SB/35		
6. Application Data	Sheet See 37 CFR 1.7	6	17.	or its equivale				
18. If a CONTINUING APPL or in an Application Data Sh	ICATION, check appropri	riale box, and supr	dy the requ		you and in a profini			
			.,oq	.a.o miamiason pa	HOW AND IN A PROUM!	nary amendment,		
Continuation Prior application Information:		ntinuation-in-part (CIP)	•	f prior application No.:	·/			
FOR CONTINUATION OR DIVIS	ExaminarIONAL APPS only: The ent	tire disclosure of th	e neine anni	Group Art Unit				
Box 5b, is considered a part of The incorporation can only be	f the disclosure of the acc	ompanying continu	ation or div	Islanal application a	in cath or declaration nd is hereby incorpor	is supplied under ated by reference.		
		. CORRESPONDE	terray Certitit	emmans and mon or	d application parts.			
Customer Number or Ber C		00003959%	es Marie		<u> </u>			
	\ \sigma(linser),Cu	Stomer No. or Attach per	code label na	or KX	Correspondence ad	Woled 23 PTD		
Name	MARK D. OL	.SON - OLSOI	N & OLS	ON				
					· · · · · · · · · · · · · · · · · · ·			
Address	2400 S.W.	4th Avenue						
City	Portland		State	OR	Zip Code	97201		
Country	U.S.A.	Tele	ohone (5	03)222-1321	Fax (50	3)274-7747		
Name (Print/Type)	MARK D. OLSON	<u> </u>	Regis	tration No. (Attorr		186		
Signature	Marke	X C2	<i>></i>			/2004		
rden Hour Statement: This form	s estimated to take 0.2 hou	rs to complete. Time	will vary der	pending upon the need	ds of the individual case	Any comments on		

the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office. Washington. DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application.

EXPRESS MAIL LABEL NO.: EU869913786 US

PTO/SB/17 (11-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of Information unless it displays a valid OVB

FEE	TRA	ANS	MI	TTA	L
1	for I	FY 2	200	2	

Patent fees are subject to annual revision.

XXX Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$) 385.00

	Course ou Cours & Asid Own Cours	oi number				
Complete If Known						
Application Number						
Filing Date						
First Named Inventor	Suzanne D. Lady					
Examiner Name						
Group Art Unit	:					
Attorney Docket No.	2125					

ł	IVI	211	עטה	OF PA	AYMENI (check		FEE CALCULATION (continued)								
1	Check Credit card Money Other None				3.	ADI	OITIC	NAL	FEES						
1	V De	posi	t Acco	unt:	- Order		La.	ge En	tity! S	mall E	ntity				
	Depo Acco	unt	Г	1	5-0500		F.	80 F	ee F	00 F	Fee Description	Fee Paid			
	Numi Depo	sit					10	5 13	30 2	05 6	Surcharge - late filing fee or oath				
ı	Acco Nan	ne			N & OLSON		12	7 5	50 2	27 2	A CAMPIONE INTERIOR				
1	he Com	mis.	sione	r is auth	orized to: (check al		13	9 13		39 13(COAST SUSSI				
X	XI Charo	8 164 A An	n,¤44) 9(8) tu	dicated	Delow LXX Cred	it any overpayment		7 2,5		39 13(17 2,52					
۱۲	Charge	a fas	(s) in	dicated t	e(s) during the pend below, except for the	ency of this applicat	ion 11			., 2.52 2 820	A A A A A A A A A A A A A A A A A A A				
19	the abo	vel	entifie	d depos	it account.	e tiling tee		- ••	٠١	- 020	Requesting publication of SIR prior to Examiner action				
L				FEE (CALCULATION		11	3 1,84	0111	3 1,840	0° Requesting publication of SIR after Examiner action				
	BASI			_			11:	5 11(21.	5 55	Extension for reply within first month				
	arge Ent			LEntity Fee	Fee Description		116		1.	6 200	Extension for reply within second month				
٩	Code (\$)		Code		- Sesemonon	Fee Paid	117		217	7 460	Extension for reply within third month				
	01 740	- 1	201	370	Utility filing fee	385.00	118	1,440	218	720	Extension for reply within fourth month				
	06. 330		206	165	Design filling fee		128	1,960	228	980	Extension for reply within fifth month				
	07 510		207	255	Plant filing fee		119	320	218	160	Notice of Appeal				
	08 740		208	370	Reissue filing fee		120	320	220	160	Filling a brief in support of an appeal				
1	14 160		214	80	Provisional filling f	••	121	280	221	140	Request for oral hearing				
					SUBTOTAL (1)	(\$) 385.00	138	1,510	138	1.510	Petition to institute a public use proceeding				
2.	EXTRA	V.C	ΔIL		FOR UTILITY	<u>,</u>	140	110	240	55	Petition to revive - unavoidable				
				•••	Fe	a from		1,280	241	640	Petition to revive - unintentional				
Tot	al Claims	•		-20-		elow Fee Paid	1	1,280	242	640	Utility issue fee (or reissue)				
Ind	ependen			ار 1 • • 3•	. <u>-</u>		143	460	243	230	Design issue fee				
	iliins Itiple Deg	end	ent	_	^ <u></u>		144	620	244	310	Plant issue fee				
					_		122	130	122	130	Petitions to the Commissioner				
Lar	ge Entit	y J	Small	Entity			123	50	123	50	Processing fee under 37 CFR 1.17(q)				
Fee	e Fee de (\$)		Fee Code	Fee (\$)	Fee Description	ı	126	180	126	180	Submission of Information Disclosure Stmt				
103	• • •		203	9	Claims In excess o	of 20	581	40	581	40	Recording each patent assignment per property (times number of properties)				
102	2 84		202	42	Independent claims	in excess of 3	146	740	246	370	Filling a submission after final rejection				
104	280	ł	204	140	Multiple dependent						(37 CFR § 1.129(a))				
109	84		209	42	"Reissue indeper over original pate	ndent claims	149	740	249	370	For each additional invention to be examined (37 CFR § 1.129(b))				
110	18		210	9	** Reissue claims i	n excess of 20	179	740	279	370	Request for Continued Examination (RCE)				
					and over original	patent	169	900	169	900	Request for expedited examination	 -			
				CHDA	OTAL (2) [7	\$)	Others	1			of a design application				
					` '		Other f	98 (SD	ecily)						
••	or numbe	er pr	evious	ly paid,	if greater; For Reiss	ues, see above	*Reduc	ed by	Basic	Filing F	Fee Paid SUBTOTAL (3) (S)				
									_						

SUBMITTED BY					Complete (ii	if applicable)
Name (Print/Type)	MARK D. OLSON	-	Registration No. (Attomey/Agent)	31,186	Telephone	(503)222-1321
Signature	WARNING	SKC			Date	3/11/2004